

TELEPHONE (312) 258-5779



SCHIFF HARDIN LLP

PATENT DEPARTMENT

6600 SEARS TOWER

233 SOUTH WACKER DRIVE

CHICAGO, ILLINOIS 60606

In re application of: Birgit Kufner

ATTY. DOCKET: P03,0274

Serial No.: 10/630,096

GROUP ART UNIT: 2615

Filed: July 30, 2003

EXAMINER: Walter F. Briney III

For: HEARING AID DEVICE WITH A VOLTAGE
SOURCE

CONFIRMATION NO.: 8482

AMENDMENT D

Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450
SIR:

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below.

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	* 6	MINUS	**20	X	() X 25.00 () X 50.00	
INDEP. CLAIMS	* 3	MINUS	3	X	() X 100.00 () X 200.00	
Application amended to contain any multiple dependent claims not previously paid for.				() YES () NO	() \$180.00 () \$360.00 ONE TIME	
				TOTAL ADDITIONAL FEE FOR THIS AMENDMENT		\$0.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 write "20" in this space.

- ☐ Applicants petition the Commissioner of Patents and Trademarks to extend this time for response to the Office Action dated ____ for ____ months so that the period for response is extended to _____. A check in the amount of \$_____ is attached to cover the cost of the extension. Any deficiency or overpayment should be charged or credited to deposit account No. 501519. A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of \$_____ is attached.
- ☐ A check for \$_____ accompanying IDS under 37 CFR 1.97(c) is attached
- ☐ A check for \$_____ and Petition for Consideration of IDS under 37 CFR 1.97(d) is attached.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to account No. 501519. A duplicate of this sheet is enclosed.
- When phoning re this application, please call (312) 258-5779.

SCHIFF HARDIN LLP (Customer Number: 26574)

BY Mark Bergner (45,877)

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450 on November 10, 2006.

Mark Bergner

NAME OF APPLICANT'S ATTORNEY

Mark Bergner

SIGNATURE

November 10, 2006

DATE

Appl. No. 10/630,096
Reply to Office Action of August 10, 2006



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

AMENDMENT D

APPLICANT: Birgit Kufner DOCKET NO: P03,0274
SERIAL NO.: 10/630,096 ART UNIT: 2615

FILED: July 30, 2003 EXAMINER: Walter F. Briney III
CONF. NO.: 8482
TITLE: HEARING AID DEVICE WITH A VOLTAGE SOURCE

5 Mail Stop Amendment
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

10 Dear Sir:

In response to the Office Action dated August 10, 2006 ("OA"), please amend the above-identified application as follows.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

15 **Remarks/Arguments** begin on page 5 of this paper.